Caloshell-500 (Calcium & Colecalciferol Tablets),	Module 1
	1.6 Product Information
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Caloshell-500 (Calc	ium & Colecalciferol Tablets), Module 1
1.6.1	Prescribing Information (Summary of Product Characteristics)

SUMMARY OF PRODUCT CHARACTERISTICS

1. NAME OF THE MEDICINAL PRODUCT

Caloshell – 500 tablets

2. QUALITATIVE AND QUANTITATIVE COMPOSITION

For full list of excipients, see section 6.1.

3. PHARMACEUTICAL FORM

Tablet

4. CLINICAL PARTICULARS

4.1 Therapeutic indications

Caloshell-500:

- should be used only as a therapeutic and not as a food supplement when the diet is deficient or when normal requirement of both components is increased.
- as an adjunct to specific therapy for osteoporosis or as a therapeutic supplement in established osteomalacia, pregnant patients at high risk of needing such a therapeutic supplementation or malnutrition when dietary intake is less than that required.

4.2 Posology and method of administration

Posology

Adults

Adjunctive therapy in osteoporosis: One tablet 2-3 times per day *Calcium and vitamin D deficiency:* One tablet 2-3 times per day.

Special Population

Elderly patients

Adjunctive therapy in osteoporosis Calcium and vitamin D deficiency Dosage as for adults.

Paediatric population

Calcium and vitamin D deficiency (only)

One tablet 1-2 times per day.

Impaired hepatic function

No dose adjustment is required.

Impaired renal function

Caloshell-500 tablets should not be used in patients with severe renal impairment (see section 4.3).

Method of Administration

Oral

4.3 Contraindications

- Hypersensitivity to the active substances or to any of the excipients listed in section 6.1
- Severe renal impairment (glomerular filtration rate < 30 ml/min)
- Diseases and/or conditions resulting in hypercalcaemia and/or hypercalciuria
- Renal calculi (nephrolithiasis)
- Hypervitaminosis D

4.4 Special Warnings and Precautions for Use

During long-term treatment, serum calcium levels should be followed and renal function should be monitored through measurement of serum creatinine. Monitoring is especially important in elderly patients on concomitant treatment with cardiac glycosides or diuretics and in patients with a high tendency to calculus formation. In case of hypercalcaemia or signs of impaired renal function, the dose should be reduced or the treatment discontinued.

Calcium carbonate and colecalciferol tablets should be used with caution in patients with hypercalcaemia or signs of impaired renal function and the effect on calcium and phosphate levels should be monitored. The risk of soft tissue calcification should be taken into account. In patients with severe renal insufficiency, vitamin D in the form of colecalciferol is not metabolised normally and other forms of vitamin D should be used.

During concomitant treatment with other high dose sources of vitamin D and/or medications or nutrients (such as milk) containing calcium, there is a risk of hypercalcaemia and milk-alkali syndrome with subsequent kidney function impairment. In these patient's serum calcium levels should be followed and renal function should be monitored.

Calcium carbonate and colecalciferol tablets should be prescribed with caution to patients suffering from sarcoidosis because of the risk of increased metabolism of vitamin D to its active form. These patients should be monitored with regard to the calcium content in serum and urine

These tablets should be used with caution in immobilised patients with osteoporosis due to the increased risk of hypercalcaemia.

4.5 Interaction with other medicinal products and other forms of interaction

Thiazide diuretics reduce the urinary excretion of calcium. Due to increased risk of hypercalcaemia, serum calcium should be regularly monitored during concomitant use of thiazide diuretics.

Calcium carbonate may interfere with the absorption of concomitantly administered tetracycline preparations. For this reason, tetracycline preparations should be administered at least two hours before, or four to six hours after, oral intake of calcium carbonate.

Hypercalcaemia may increase the toxicity of cardiac glycosides during treatment with calcium and vitamin D. Patients should be monitored with regard to electrocardiogram (ECG) and serum calcium levels.

If a bisphosphonate is used concomitantly, this preparation should be administered at least one hour before the intake of calcium carbonate and colecalciferol tablets since gastrointestinal absorption may be reduced.

The efficacy of levothyroxine can be reduced by the concurrent use of calcium, due to decreased levothyroxine absorption. Administration of calcium and levothyroxine should be separated by at least four hours.

The absorption of quinolone antibiotics may be impaired if administered concomitantly with calcium. Quinolone antibiotics should be taken two hours before or six hours after intake of calcium.

Calcium salts may decrease the absorption of iron, zinc and strontium ranelate. Consequently, iron, zinc or strontium ranelate preparations should be taken two hours before or after calcium carbonate and colecalciferol tablets.

Treatment with orlistat may potentially impair the absorption of fat-soluble vitamins (e.g. vitamin D3).

4.6 Fertility, Pregnancy and Lactation

Pregnancy

Calcium carbonate and colecalciferol tablets can be used during pregnancy, in case of a calcium and vitamin D deficiency. During pregnancy the daily intake should not exceed 2500 mg calcium and 4000 IU vitamin D. Studies in animals have shown reproductive toxicity with high doses of vitamin D. In pregnant women, overdoses of calcium and vitamin D should be avoided as permanent hypercalcaemia has been related to adverse effects on the developing foetus. There are no indications that vitamin D at therapeutic doses is teratogenic in humans.

Lactation

Calcium carbonate and colecalciferol Tablets can be used during breast-feeding. Calcium and vitamin D3 pass into breast milk. This should be considered when giving additional vitamin D to the child.

4.7 Effects on ability to drive and use machines

Calcium carbonate and colecalciferol tablets have no known influence on ability to drive and use machines.

4.8 Undesirable effects

Adverse reactions are listed below, by system organ class and frequency. Frequencies are defined as: uncommon ($\geq 1/1,000$, to <1/100); rare ($\geq 1/10,000$ to <1/1,000); very rare ($\leq 1/10,000$) or not known (cannot be estimated from the available data).

Immune system disorders

Not known: Hypersensitivity reactions such as angio-oedema or laryngeal oedema.

Metabolism and nutrition disorders

Uncommon: Hypercalcaemia and hypercalciuria.

Very rare: Milk-alkali syndrome (frequent urge to urinate; continuing headache; continuing loss of appetite; nausea or vomiting; unusual tiredness or weakness; hypercalcaemia, alkalosis and renal impairment). Seen usually only in overdose.

Gastrointestinal disorders

Rare: Constipation, dyspepsia, flatulence, nausea, abdominal pain and diarrhoea.

Skin and subcutaneous disorders

Rare: Pruritus, rash and urticaria.

4.9 Overdose

Symptoms

Overdose can lead to hypercalcaemia and hypervitaminosis D. Symptoms of hypercalcaemia may include anorexia, thirst, nausea, vomiting, constipation, abdominal pain, muscle weakness, fatigue, mental disturbances, polydipsia, polyuria, bone pain, nephrocalcinosis, nephrolithiasis and in severe cases, cardiac arrhythmias. Extreme hypercalcaemia may result in coma and death. Persistently high calcium levels may lead to irreversible renal damage and soft tissue calcification. Milk-alkali syndrome may occur in patients who ingest large amounts of calcium and absorbable alkali.

Treatment of hypercalcaemia

Treatment is essentially symptomatic and supportive. The treatment with calcium and vitamin D must be discontinued. Treatment with thiazide diuretics and cardiac glycosides must also be discontinued (see section 4.5). Treatment is rehydration, and, according to severity of hypercalcaemia, isolated or combined treatment with loop diuretics, bisphosphonates, calcitonin and corticosteroids should be considered. Serum electrolytes, renal function and diuresis must be monitored. In severe cases, ECG and CVP should be followed.

5. PHARMACOLOGICAL PROPERTIES

5.1 Pharmacodynamic properties

Pharmacotherapeutic group: Mineral supplements, Calcium combinations with vitamin D

and/or other drugs. ATC code: A12AX

Vitamin D3 increases the intestinal absorption of calcium.

Administration of calcium and vitamin D3 counteracts the increase of parathyroid hormone (PTH) which is caused by calcium deficiency and which causes increased bone resorption. A clinical study of institutionalised patients suffering from vitamin D deficiency indicated that

a daily intake of calcium /vitamin D normalised the value of the 25-hydroxylated metabolite of vitamin D3 and reduced secondary hyperparathyroidism and alkaline phosphatases.

5.2 Pharmacokinetic properties

Calcium

Absorption: The amount of calcium absorbed through the gastrointestinal tract is approximately 30% of the swallowed dose.

Distribution and biotransformation: 99% of the calcium in the body is concentrated in the hard structure of bones and teeth. The remaining 1% is present in the intra- and extracellular fluids. About 50% of the total blood-calcium content is in the physiologically active ionised form with approximately 10% being complexed to citrate, phosphate or other anions, the remaining 40% being bound to proteins, principally albumin.

Elimination: Calcium is eliminated through faeces, urine and sweat. Renal excretion depends on glomerular filtration and calcium tubular reabsorption.

Cholecalciferol

Absorption: Vitamin D3 is easily absorbed in the small intestine.

Distribution and biotransformation: Colecalciferol and its metabolites circulate in the blood bound to a specific globulin. Colecalciferol is converted in the liver by hydroxylation to 25 hydroxycolecalciferol. It is then further converted in the kidneys to the active form 1,25-dihydroxycolecalciferol; 1,25-dihydroxycolecalciferol is the metabolite responsible for increasing calcium absorption. Vitamin D which is not metabolised is stored in adipose and muscle tissues.

Elimination: Vitamin D3 is excreted in faeces and urine.

5.3 Preclinical safety data

At doses far higher than the human therapeutic range teratogenicity has been observed in animal studies.

6. PHARMACEUTICAL PARTICULARS

6.1 List of excipients

Starch USP NF
Lactose Monohydrate
Starch USPNF
Sodium Starch Glycolate BP
Povidone USP
Methylparaben BP
Purified Water BP
Magnesium Stearate BP
Talc BP
Sodium Lauryl Sulphate

6.2 Incompatibilities

Not applicable

6.3 Shelf life

24 Months

6.4 Special precautions for storage

Store in a dry place, below 25 °C. Protect from light.

6.5 Nature and contents of container

10 Blister strips of 10 tablets each.

6.6 Special precautions for disposal and other handling

No special requirements

7. Marketing authorisation holder

Emcure Pharmaceuticals Limited Lane No. 3, Phase-II, SIDCO,

Bari-Brahmana, Jammu - 181 133, INDIA

8. Marketing authorisation number(s)

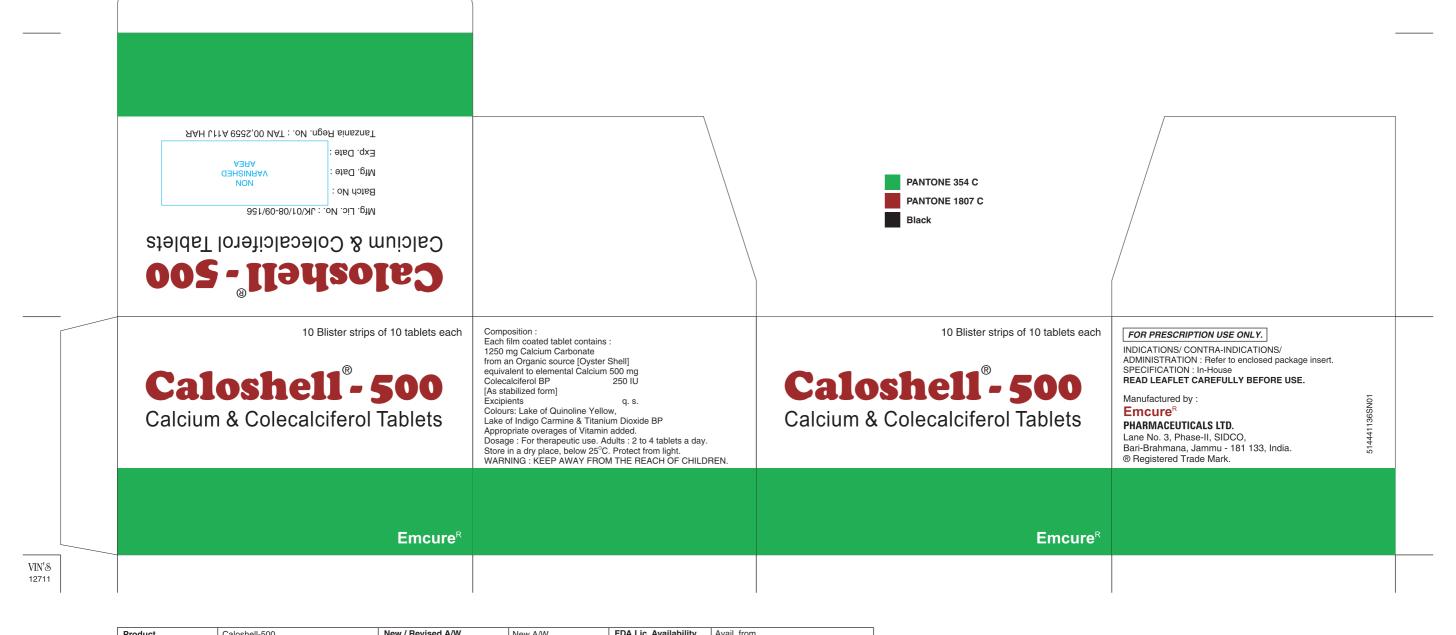
Not Applicable

9. Date of first authorisation/renewal of the authorisation

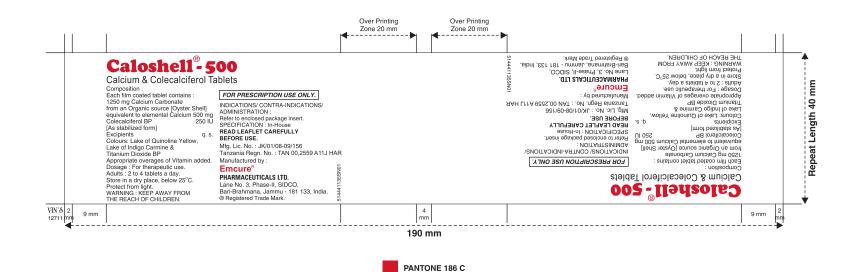
Not Applicable

10. Date of revision of the text

03rd Dec 2020



Product	Calostieli-500	New / neviseu A/W	New A/W	FDA LIC. Availability	Avaii. IIOIII
Dosage form	Tablet	Reason for change	N.A.	Proof 1	06.07.2011
Therapeutic Category	Calcium Supplement	Colour Scheme	Pantone	Corrections of Proof 1	Editorial changes
Item	Senegal Export Carton A/W	Pantone Shades	354 C, 1807 C & Black	Proof 2	08.07.2011
Dimension	L. 94 x W. 75 x H. 63 mm	Total No. of Colours	3	Corrections of Proof 2	None
Substrate	ITC, FBB	Special Effect (if any)	N.A.	Proof 3	N.A.
Specification	UV Varnished, 300 GSM	Item Code	514441136SN01	Corrections of Proof 3	N.A.
Printing Area	F/F	Marketing Division	Emcure	Final	12.07.2011
Item Style	Lock Bottom	Design / Colour Approved on	At the time of launching	A/W Checked by	PMD Cell
A/W Proportion	Same Size	Vendor		A/W Verified by	Production / QC
Product Status	Emcure Own Jammu Unit	Country	Senegal Export	A/W Approved by	Unit Head
Remark (If any): New f	or Senegal Export				



Product	Caloshell - 500	New / Revised A/W	New A/W	FDA Lic. Availability	Avail. from
Dosage form	Tablet	Reason for change	N.A.	Proof 1	06.07.2011
Therapeutic Category	Calcium Supplement	Colour Scheme	Pantone	Corrections of Proof 1	Editorial changes
Item	Senegal Export Foil A/W	Pantone Shades	186 C & Black	Proof 2	08.07.2011
Dimension	190/2 mm ; RL 40 mm ; OPZ 20 mm	Total No. of Colours	2	Corrections of Proof 2	None
Substrate	Aluminium foil (Blister size : 91 x 59 mm)	Special Effect (if any)	N.A.	Proof 3	N.A.
Specification	VMCH coated 0.02 mm foil	Item Code	514441135SN01	Corrections of Proof 3	N.A.
Printing Area	F/F	Marketing Division	Emcure	Final	12.07.2011
Item Style	Continuous roll printing	Design / Colour Approved on	At the time of launching	A/W Checked by	PMD Cell
A/W Proportion	Same Size	Vendor		A/W Verified by	Production / QC
Product Status	Emcure Own Jammu Unit	Country	Senegal Export	A/W Approved by	Unit Head
Remark (If any): New f	or Senegal Export				1

Black

For the use only by a Registered Medical Practitioner or a Hospital or a Laboratory.

Caloshell® 500

Calcium & Colecalciferol Tablets

COMPOSITION:

Each film coated tablet contains:

1250 mg Calcium Carbonate from an Organic source [Oyster Shell] equivalent to elemental Calcium 500 mg Colecalciferol BP

[As stabilized form]

Excipients

Colours: Lake of Quinoline Yellow, Lake of Indigo Carmine & Titanium Dioxide BP Appropriate overages of Vitamin added.

PROPERTIES:

Calcium carbonate has three main actions : it neutralizes gastric acid, supplements dietary calcium and sequesters Phosphorus in the intestine. Calcium carbonate derived from Oyster shell has higher content of elemental calcium, which is more soluble and better absorbed. Vitamin D₃ contained in "Caloshell" enhances calcium absorption from intestine and also helps to deposit the calcium in bones.

INDICATIONS:

- Pregnancy & Lactation.
- Adolescent boys & girls.
- Rickets.
- Osteomalacia
- Osteoporosis.
- Fractures.
- \bullet As supplement to prevent osteoporosis in menopausal & post-menopausal women.

DOSAGE:

2-4 tablets per day or as directed by the Physician.

Dosage regimen: It is recommended as a routine supplementation from infancy to old age (including period of second half pregnancy), because of the daily need of calcium. However dosage will differ from case to case which will be as

directed by the Physician. SIDE EFFECTS:

Caloshell contains calcium carbonate derived from Oyster shell, which is easily soluble and completely absorbed, hence chances of side effects are minimum which are constipation, chalky taste in mouth.

CONTRAINDICATIONS:

There is no specific contraindications to caloshell, however common contraindications are

Nausea

Epigastric discomfort

DRUG INTERACTION:

Calcium carbonate may interfere with the absorption of other drugs from the gastrointestinal tract if administered concomitantly.

WARNING:

KEEP AWAY FROM THE REACH OF CHILDREN.

PRECAUTIONS:

It should be used cautiously in patients with angina pectoris, unstable angina.

It is recommended to patients with hypercalciuria.

USAGE / ADMINISTRATION: Oral

PRESENTATION: 10 tablets in a blister strip.

STORAGE: Store in a dry place, below 25°C. Protect from light.

Manufactured by:

Emcure^R

PHARMACEUTICALS LTD.

Lane No. 3, Phase-II, SIDCO,

Bari-Brahmana, Jammu - 181 133, India.

® Registered Trade Mark.

514441137SN0

VIN'8 13711

Product	Caloshell-500	New / Revised A/W	New A/W	FDA Lic. Availability	Avail. from	
Dosage form	Tablet	Reason for change	N.A.	Proof 1	06.07.2011	
Therapeutic Category	Calcium Supplement	Colour Scheme	Black	Corrections of Proof 1	Editorial changes	
Item	Senegal Export Pack Insert A/W	Pantone Shades	N.A.	Proof 2	08.07.2011	
Dimension	L. 80 x H. 210 mm (Folded 80 x 27 mm)	Total No. of Colours	1	Corrections of Proof 2	None	
Substrate	Super white maplitho paper (J. K. Mill)	Special Effect (if any)	N.A.	Proof 3	N.A.	
Specification	60 GSM	Item Code	514441137SN01	Corrections of Proof 3	N.A.	
Printing Area	F/F	Marketing Division	Emcure Export	Final	13.07.2011	
Item Style	N.A.	Design / Colour Approved on	At the time of launching	A/W Checked by	PMD Cell	
A/W Proportion	Same Size	Vendor		A/W Verified by	Production / QC	
Product Status	Emcure Own Jammu Unit	Country	Senegal Export	A/W Approved by	Unit Head	
Remark (If any): New f	Remark (If any): New for Senegal Export					

Caloshell-500 (Calcium & Colecalciferol Tablets), M	Iodule 1
1.6.3	Patient Information Leaflet

PATIENT INFORMATION LEAFLET

CALOSHELL®-500 TABLETS

calcium / colecalciferol

Read all of this leaflet carefully because it contains important information for you.

- Always take this medicine exactly as described in this leaflet or as your doctor or pharmacist have told you. Keep this leaflet. You may need to read it again.
- Ask your pharmacist if you need more information or advice.
- You must talk to a doctor if you do not feel better or if you feel worse after two weeks.
- If you get any side effects, talk to your doctor or pharmacist. This includes any possible side effects not listed in this leaflet. See section 4.

In this leaflet:

- 1. What Caloshell-500 is and what it is used for
- 2. What you need to know before you take Caloshell-500
- 3. How to take Caloshell-500
- 4. Possible side effects
- 5. How to store Caloshell-500
- 6. Contents of the pack and other information

1. WHAT CALOSHELL-500 IS AND WHAT IT IS USED FOR

Caloshell-500 Tablets containing calcium and vitamin D₃ which are both important substances in bone formation. Both are found in the diet and vitamin D is also produced in the skin after exposure to the sun.

Caloshell-500 is used to treat and prevent vitamin D/calcium deficiency, which may occur when your diet or lifestyle does not provide enough, or when body requirements are increased. This medicine may also be prescribed or recommended for certain bone conditions, for example osteoporosis, or during pregnancy.

2. WHAT YOU NEED TO KNOW BEFORE YOU TAKE CALOSHELL-500

Do not take Caloshell-500 Tablets if you:

- are allergic to calcium, vitamin D, or any of the other ingredients of this medicine (listed in section 6).
- have severe kidney problems
- have a condition that causes excessive amounts of calcium in your blood or urine (hypercalcaemia or hypercalciuria) e.g.
 - renal (kidney) failure
 - cancer that has affected your bones
- have excessive amounts of Vitamin D in your blood
- have kidney stones.

Warnings and precautions

Talk to your doctor or pharmacist before taking Caloshell-500:

- if you have **osteoporosis** (brittle bones) and are also unable to move around
- if you are on long term treatment, especially if you are taking medicines for a **heart disorder** (cardiac glycosides), or **diuretics** (used in the treatment of high blood pressure or oedema)
- if you have signs of **impaired renal function** or a high tendency to **kidney stone** (calculus) formation
- if you have **cancer** or any other conditions that may have affected your bones.
- if you have **sarcoidosis** (an immune system disorder which may cause increased levels of vitamin D in the body).

If you have any of the following conditions your serum calcium or phosphate levels, or urinary calcium excretion must be monitored. Caloshell-500 should be taken under close medical supervision.

- **sarcoidosis** (an immune system disorder which may affect your liver, lungs, skin or lymph nodes)
- **kidney** problems
- you are on **long-term treatment** with Caloshell-500
- you are already taking **additional doses** of **calcium** or **vitamin D**.

If you have increased calcium levels in the blood or develop signs of kidney problems, the dose of Caloshell-500 should be reduced or the treatment discontinued.

Other medicines and Caloshell-500

Please inform your doctor or pharmacist if you are taking or have recently taken or might take any other medicines.

In particular, the following medicines may interact with Caloshell-500 tablets:

- thiazide diuretics (water tablets); your serum calcium levels should be monitored regularly.
- **cardiac glycosides** (heart medicines); you should be monitored by electrocardiogram (ECG) and your serum calcium levels measured.
- **tetracycline antibiotics**; these should be taken at least two hours before, or four to six hours afterwards. Calcium carbonate may interfere with the absorption of tetracycline preparations if taken at the same time.
- **levothyroxine** (hormone used to treat thyroid deficiency); these should be taken at least four hours before or after taking Caloshell-500.
- quinolone antibiotics (ciprofloxacin, iomefloxacin, norfloxacin, sparfloxacin): the effect of these medicines may be reduced if taken at the same time as calcium. Take quinolone antibiotics two hours before or six hours after taking Caloshell-500.
- **bisphosphonates**; should be taken at least one hour before Caloshell-500.
- Calcium salts may decrease the absorption of **iron, zinc and strontium ranelate**. Consequently, iron, zinc or strontium ranelate preparations should be taken at least two hours before or after Caloshell-500.
- **Orlistat** (used to treat obesity) may disturb the absorption of fat-soluble vitamins, e.g. vitamin D3.

If you are taking any of the above mentioned medicines, your doctor will give you further instructions.

Taking Caloshell-500 with food and drink

Caloshell-500 can be taken with or without food and drink.

Pregnancy and breastfeeding

If you are pregnant or breast-feeding, think you may be pregnant or are planning to have a baby, ask your doctor or pharmacist for advice before taking Caloshell-500.

If you are pregnant, you may use this medicine in case of a calcium and vitamin D deficiency. During pregnancy you should not take more than 2500 mg calcium and 4000 IU vitamin D per day, as overdoses may harm the unborn child.

Caloshell-500 can be used during breast-feeding. Calcium and vitamin D₃ pass into breast milk. This should be considered when giving additional vitamin D to the child.

Driving and using machines

Caloshell-500 has no known influence on the ability to drive or use machines.

3. HOW TO TAKE CALOSHELL-500 TABLETS

Always take Caloshell-500 exactly as your doctor has told you. Check with your doctor or pharmacist if you are not sure.

Dosage

The recommended dose is two or three tablets a day, preferably one tablet in the morning, one at midday and one in the evening.

Children

The recommended dose is two tablets a day, preferably one tablet in the morning and one tablet in the evening.

If you take more than you should

If you have taken more Caloshell-500 than you should, talk to your doctor or pharmacist immediately.

If you forget to take Caloshell-500 Tablets

Do not take a double dose to make up for a forgotten tablet.

If you have any further questions on the use of this medicine, ask your doctor or pharmacist.

4. POSSIBLE SIDE-EFFECTS

Like all medicines, this medicine can cause side effects, although not everybody gets them.

Stop taking your medicine and see a doctor immediately if you experience:

- Frequent urge to urinate
- Headache
- Loss of appetite, nausea or vomiting
- Unusual tiredness or weakness, along with elevated levels of calcium in the blood and kidney impairment.

Side effects include:

Uncommon side effects (may affect up to 1 in 100 people):

• excessive amounts of calcium in your blood (hypercalcaemia) or in your urine (hypercalcuria) may occur with large doses

Rare side effects (may affect up to 1 in 1,000 people):

- nausea
- stomach ache
- constipation
- heartburn (dyspepsia)
- diarrhoea
- wind (flatulence)
- rash
- hives
- itching

Very rare side-effects (may affect up to 1 in 10,000 people):

• Milk alkali syndrome (also called Burnett's Syndrome and usually only seen when excessive amounts of calcium have been ingested), symptoms are frequent urge to urinate, headache, loss of appetite, nausea or vomiting, unusual tiredness or weakness, along with elevated levels of calcium in the blood and kidney impairment.

Side effects with frequency not known (cannot be estimated from the available data):

- Hypersensitivity reactions such as swelling of the face, tongue, lips (angioedema) or swelling of the throat (laryngeal oedema).
- If you have impaired renal function, you may be at risk of increased amounts of phosphate in the blood, renal stone formation and increased amounts of calcium in the kidneys.

5. HOW TO STORE CALOSHELL-500 TABLETS

Keep out of the sight and reach of children.

Do not use Caloshell-500 after the expiry date which is stated on the label after EXP. The expiry date refers to the last day of that month. If the tablets have changed shape or colour do not use.

Do not throw away any medicines via wastewater or household waste. Ask your pharmacist how to throw away medicines you no longer use. These measures will help to protect the environment.

6. CONTENTS OF THE PACK AND OTHER INFORMATION

What Caloshell-500 Tablets contain

The active ingredients in each tablet are: Calcium Carbonate [Oyster Shell], Colecalciferol [Vitamin D3]

The other ingredients are:

Starch USP NF

Lactose Monohydrate

Starch USPNF

Sodium Starch Glycolate BP

Povidone USP

Methylparaben BP

Purified Water BP

Magnesium Stearate BP

Talc BP

Sodium Lauryl Sulphate

What Caloshell-500 look like and contents of the pack

The tablets are round, white, uncoated convex and orange flavoured; they may have small specks.

The tablets are packed in white, plastic bottles of 100 tablets.

Marketing Authorisation Holder:

Emcure Pharmaceuticals Limited

Manufacturer:

Emcure Pharmaceuticals Limited.

Lane No. 3, Phase-II, SIDCO,

Bari-Brahmana, Jammu - 181 133, INDIA

Additional Information

Caloshell-500 are a combination of calcium and vitamin D designed to keep bones healthy. Calcium is an essential component of bones while vitamin D plays an important role in the absorption of calcium from food.

Requirements for calcium increase with age and, although many people obtain enough calcium from their diet, some people may require a supplement in order that their body has all the calcium it needs to maintain healthy bones. Vitamin D is produced largely from the action of sunlight. Certain foodstuffs do contain vitamin D in reasonable amounts but it is not always possible to obtain all the vitamin D you need from your diet. People who do not get out and about, for instance those who are housebound or people living in nursing and residential homes, may not receive all the vitamin D they need.

People with diets and lifestyles that mean they will obtain less than the recommended intake of calcium and vitamin D are at risk of weakened bones. Prolonged lack of adequate calcium and vitamin D intake can lead to the development of osteoporosis, a condition where bones become weak

to a level that minimal trauma (for example, a fall) can result in a fracture, most typically at the hip, spine or wrist.

Caloshell-500 has been designed to give people, whose intakes of calcium and vitamin D are low, a boost to the recommended amounts.

Maintaining healthy bones and helping to avoid osteoporosis is an important issue for many people. There are many ways that people can help themselves: regular exercise, a balanced diet with an adequate intake of calcium and vitamin D and, for some people, advice on how to prevent falls which may lead to fracture.

1.6.4	4 Mock ups & Specimens

Caloshell-500 (Calcium & Colecalciferol Tablets), Module 1

1.6.5	Information About Experts

Caloshell-500 (Calcium & Colecalciferol Tablets), Module 1

Emcure
Caloshell-500 (Calcium & Colecalciferol Tablets), Module 1

Decaration signed by the Experts-

Quality Informtion about Expert – Quality

1.6.5.1

Declaration Signed by the Expert – Quality

1.4.1 Quality Information

According to his respective qualification the undersigned expert declares to have performed the duties set out in the Article 12 and in accordance with Annex I, Part I 1.4 of Directive 2001/83/EC, as amended.

Name of the Expert: Dr. Vikram Gharge

Designation: Associate Director – R&D

Address : Emcure Pharmaceuticals Limited

R&D Centre, C- 10/12, M.I.D.C.

Bhosari, Pune-411026.

Contact No. : 020-30610000

Signature : Wego

Date : 11.07.2019

According to the Annex I of Directive 2001/83/EC as amended, brief information on the Educational background, training and occupational experience of the expert is attached.

Emcure Pharmaceuticals Limited

Curriculum Vitae of the Expert

Name Dr. Vikram S. Gharge

Sex Male

Age 38 yrs

Education Qualification Ph.D, MS.PHARM, B.Pharm

Work Experience Total Experience in Pharmaceutical industry is 16 years.

• Chemist: Biostar Pharmaceutical Ltd, Pune,

Scientist -I: Emcure Pharmaceutical Ltd, Pune,

Executive: Glenmark Lab Pvt. Ltd Goa.

Principal Scientist: Emcure Pharmaceutical Ltd, Pune.

Current Assignment Principal Scientist Formulation Development, Pune.

Emcure Pharmaceuticals Ltd. Pune.

Summary of Experience Design and development of various pharmaceutical dosage

forms : e.g. Tablet, Capsule, Sterile dosage form, Liquid orals,

Semi solid preparations, Sustained Release dosage form,

NDDS, Target drug delivery system.

Caloshell-500 (Calcium & Cole	ecalciferol Tablets), M	odule 1	
1. Non- Clinical Inf			y the Experts- – Non- clinical



Information about the Expert

1.4.2 Non-clinical Information

According to her respective qualifications the undersigned expert declares hereby to have performed the duties set out in the article 12 and in accordance with Annex I, Parts I 1.4 of Directive 2001/83/EC, as amended.

Name of the Expert : Dr. Neha Vala Signature:

Address : Emcure Pharmaceuticals Ltd,

Uvarsad Square,

Sarkhej Gandhinagar Highway,

Adalaj, Dist. Gandhinagar, 382421

India.

Date : 25-May-2020

According to the Annex I of Directive 2001/83/EC as amended , brief information on the educational back ground , training and occupational experience is attached.

The expert has written this over view at the request of the applicant. The non-clinical overview represents an independent opinion of the experts who are not subject to directives given by the applicant nor committed to her.

SOP/WI No.	Status	Revision no	Supersedes
SOP-QA-002-00	Final	00	Not Applicable
Attachment No.	Title:		Date Effective
T-01-00	Template of Cu	Template of Curriculum Vitae (CV)	

CURRICULUM VITAE						
Full Manage			rst.	Middle		_ast
Full Name		D	r. Neha	Rupesh	. \	√ala
Present position		D	eputy General Ma	anager		
Department		Р	harmacovigilance	and Clinical Re	esearc	h
Employee Code		10	0013074			
Office Address		E	mcure Pharmace	uticals Limited	(Gandh	ninagar)
Telephone Number Code, Area Code, I	•	+9	91 79 30640153,	ext: 4838.		
Email id		ne	eha.vala@emcure	e.co.in		
Education/Acader	nic Qualific	ati	ons: (List all colle	eges, Universiti	es, Loc	cations)
Degree/Certificat ion	Date (YYYY)		Institution, Cou	ıntry		
MBBS	2005	Sardar Patel University, Gujarat, India		I		
Employment Expe	erience: (Lis	st a		•		
Start and End Dates	Title		Institution or Company, State/Province/Country along with brief description of Job Responsibilities			
May 2018 to till date	Deputy General Manager		Emcure Pharr Gujarat, India Job responsibilit		Limited below	, Gandhinagar,
Jan 2010 to Apr 2018	Deputy General Manager		India Job responsibil responsible for activities. Ensure comp pharmacovigilan Serious adverse Act as medical a Handling audits	ity-Operations management pliance and ace activities. event manage advisor to Europ and inspections of risk managen	In-cha of p qu ement o pean Q s nent pla	PPV an, periodic safety

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May 2008 to Dec 2009	Emergency response centre physician	GVK Emergency Management and Research Institute, Ahmedabad, India Job responsibility- online pre hospital medical advice to technician in 108 ambulance for the medical emergencies Medical emergency training of technicians
Apr 2007 to Feb 2008	Contractual medical officer	Ranbaxy laboratories Ltd., Delhi, India Job responsibility- Monitor and manage adverse reaction in study
Aug 2006 to Mar 2007	Clinical Research Physician	Lambda Therapeutic Research Limited, Ahmedabad, India Job responsibility- clinical research physician for bioequivalence studies Protocol preparation of bioequivalence study Monitor and manage adverse reaction in study Screening of the healthy volunteers
Aug 2005 to Jul 2006	Research Associate	Veeda Clinical Research, Ahmedabad, India Job responsibility- clinical research physician for bioequivalence studies Monitor and manage adverse reaction in study Screening of the healthy volunteers

Current Job Responsibilities:

- Act as pharmacovigilance officer in-charge or pharmacovigilance responsible person as per regulatory requirement.
- Maintain oversight on global pharmacovigilance and its quality management related functions and ensuring compliance with local regulations and company's global pharmacovigilance requirements.
- To guide and train pharmacovigilance employees to use more effective methodologies and improve efficiency. Conducting pharmacovigilance training as needed to applicable personnel of the company.
- Contributing to the on-going enhancement of Pharmacovigilance processes and preparing and reviewing of standard operating procedures related to pharmacovigilance, as needed.
- Medical review of literature articles, individual case safety reports, aggregate reports and risk management plans as needed for regulatory submissions for domestic and international markets.
- · To ensure timely submissions without anything being missed out.

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- Providing inputs into timely response to safety related queries and product queries as needed received from different regulatory agencies, healthcare professionals and consumers for domestic and internationally marketed products.
- Provide medical conclusion for signal management activity for the company's product and keep oversight on risk minimisation activities.
- Providing support as needed for regulatory authority inspections and audits
- Provide response to pharmacovigilance related queries from various departments (formulation, regulatory, marketing)
- Provide inputs to clinical and non-clinical overviews/documents if required for domestic and international regulatory submission for US, EU & Emerging countries as per the current required regulatory guidelines.
- Provide medical inputs to the prepared Product labels (e.g. Summary of product characteristics- SmPCs) and Patient information leaflets for domestic and internationally marketed products for US, EU & Emerging countries as per the current required regulatory guidelines.
- Oversight on clinical research activities including BA-BE studies and patient based studies conducted at various CROs
- Cross functional co-ordination and support for the core functional formulation teams as well as clinical research team
- Provide inputs to protocol, reports and any other documentation of studies as necessary
- Involve in discussions between formulation, regulatory and IPR (intellectual property rights) team on weekly basis meetings or as appropriate for regulatory guidelines/requirements of product development right from pre-formulation till completion of bio-studies for regulated and semi-regulated markets
- Providing medical inputs on the team when required for any studies
- Provide approval and sign for clinical and non-clinical overview reports required during dossier application

Trainings/Certifications:

GCP TRAINING

- At Veeda clinical research, Ahmedabad
- Advanced and basic GCP training at Lambda Therapeutics

MEDICAL

- CPR training at V.S. hospital
- Advanced and basic life support training at Veeda clinical research.
- Advanced and basic ECG training at Veeda clinical research
- Emergency response training for 6 days at Hyderabad EMRI
- CareCon 2008 held BY EMRI at GMFC Ahmedabad.

OTHER

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 MedDRA Training by Dr. Eliot Brown (Eliot Brown Consulting Ltd) 					
 Doubling personal productivity training held by Lambda Therapeutics at AMA 					
Ahmedabad Business	Etiquette	training held by EMR	1.		
 Business Management 	t training	held by Lambda Ther	apeutics		
Personal Details:			*		
Gender		Female .			
Marital Status		Married			
Membership of Scientific Societies No ☐ Yes ☒ If yes, specify or attach docume Member of Ahmedabad Medical Association a Indian Medical Association					
Publications No ⊠ Yes ☐ If yes, specify or attach document					
Employee's name Employee's signature Date					
Dr. Neha Vala		ia	15 Jul 2019		
Line manager's name Line ma		nager's signature	Date		
Dr. Steven Hagen	\r	•	15 Jul 2019		

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Emcure
Caloshell-500 (Calcium & Colecalciferol Tablets), Module 1

1.6.5.3 Decaration signed by the Experts-Clinical Informtion about Expert – Clinical



Information about the Expert

1.4.3 Clinical Information

According to her respective qualifications the undersigned expert declares hereby to have performed the duties set out in the article 12 and in accordance with Annex I, Parts I 1.4 of Directive 2001/83/EC, as amended.

Name of the Expert : Dr. Neha Vala Signature:

Address : Emcure Pharmaceuticals Ltd,

Uvarsad Square,

Sarkhej Gandhinagar Highway,

Adalaj, Dist. Gandhinagar, 382421

India.

Date : 25-May-2020

According to the Annex I of Directive 2001/83/EC as amended, brief information on the educational back ground, training and occupational experience is attached.

The expert has written this over view at the request of the applicant. The clinical overview represents an independent opinion of the experts who are not subject to directives given by the applicant nor committed to her.

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		CURRICULUI	VI VITAE		
Full Name		First -	Middle	Last	
Full Name	Full Name		Rupesh	Vala	
Present position		Deputy General	Manager		
Department		Pharmacovigila	nce and Clinical Re	esearch	
Employee Code		10013074			
Office Address		Emcure Pharma	aceuticals Limited (Gandhinagar)	
Telephone Number Code, Area Code, I	•	+91 79 3064015	53, ext: 4838.		
Email id		neha.vala@emo	cure.co.in		
Education/Acader	nic Qualific	ations: (List all o	colleges, Universitie	es, Locations)	
Degree/Certificat ion	Date (YYYY)	Institution, (Country		
MBBS	2005	Sardar Patel	Sardar Patel University, Gujarat, India		
Employment Expe	erience: (Lis				
Start and End Dates	Title			tate/Province/Country f Job Responsibilities	
May 2018 to till date	Deputy General Manager	Gujarat, India		imited, Gandhinagar,	
Jan 2010 to Apr 2018	Deputy General Manager	India Job responsible activities. Ensure compharmacovig Serious adversed Act as medical reviews	sibility-Operations for management ompliance and glance activities. erse event manager al advisor to Europedits and inspections	s ent plan, periodic safety	

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- Advanced and basic ECG training at Veeda clinical research
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 MedDRA Training by D 	Dr. Eliot B	rown (Eliot Brown Co	nsulting Ltd)		
Doubling personal productivity training held by Lambda Therapeutics at AMA					
Ahmedabad Business Etiquette training held by EMRI.					
Business Management training held by Lambda Therapeutics					
Personal Details:					
Gender		Female .			
Marital Status		Married			
Membership of Scientific Societies M		No Yes If yes, specify or attach document Member of Ahmedabad Medical Association and and and Medical Association			
Publications	N	Yes If yes, specify or attach document			
Employee's name	Employee's signature		Date		
Dr. Neha Vala	Nelia		15 Jul 2019		
Line manager's name Line ma		nager's signature	Date		
Dr. Steven Hagen	\r	•	15 Jul 2019		

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